Dennis L. Breo's Reply

In 1992 (May 27, October 7), *JAMA* published three award-winning articles written by Dennis L. Breo reporting interviews of the key physicians who did the emergency care and autopsy of President John F. Kennedy. The autopsy pathologists reaffirmed their 1963 finding that JFK was killed by two bullets fired from behind, supporting the Warren Commission conclusion of a lone assassin.

The interviewees questioned the credibility of the 1992 book written by Charles A. Crenshaw, MD, in which he represents himself as "the surgeon" who tried to save JFK's life. Crenshaw says his observations revealed the bullets "struck Kennedy from the front," proving both multiple gunmen and a conspiracy, and that the autopsy was faked to disguise these shots.

However, four of Crenshaw's colleagues, the acknowledged leaders in the emergency care team, told *JAMA* Crenshaw is wrong. For example, Charles Baxter, MD, told *JAMA*, "I've known him [Crenshaw] since he was three years old. His claims are ridiculous. . . . Most of those who know the facts express disgust at Crenshaw's claims and question if he was involved in the care of the President at all. . . ."

In 1993, Crenshaw and his coauthor, Gary Shaw, a leading conspiracy theorist, sued the AMA, among others, for libel. The plaintiffs and their contingency-fee lawyers asked damages of $35 million. When they accepted the AMA insurer's offer of $213 000, plus publication of their commentary in *JAMA*, AMA's insurance ceased and AMA acquiesced to the settlement rather than pay the cost of trial.

Thus, this is an unsettling settlement. In 1992, *JAMA* Editor George D. Lundberg, MD, told a press conference that the Crenshaw book is a "sad fabrication based upon unsubstantiated allegations." He still believes this and so does Dennis Breo. Everything learned during 14 months of pretrial depositions supports this belief.

Crenshaw complains that we did not interview him prior to publication; we thought his heavily publicized book spoke for itself. The overriding point of the criticisms of Crenshaw's book is not whether he was in Trauma Room 1 with JFK; rather, it is whether under these circumstances he could reasonably distinguish bullet entrance wounds from exit wounds. That's one reason we have autopsies.

Crenshaw dedicates his book to the "Chief," Tom Shires, MD, the man who directed Crenshaw's training as a surgical resident in 1963. In his Warren Commission testimony, Dr Shires says: ". . . it's just *impossible* [emphasis added] to state with any certainty, looking at a given wound, what the nature of the wound was . . . " (Volume 6, page 110).

Crenshaw himself, under questioning during his deposition of October 25, 1994, makes this admission (page 204): "You," Dr Crenshaw was asked, "in 1963, did not have the background or training to perform the procedures that a forensic pathologist would perform to determine the direction of entry of these wounds, did you?" Crenshaw: "No." Crenshaw was next asked, "And you don't today, do you?" Crenshaw: "No, I'm not a pathologist."

Exactly. That's why we have autopsies.

Crenshaw's book emphasizes that Crenshaw's care of Kennedy is an "indelible" memory. Yet, in materials delivered at deposition as part of his "research" for the book, Crenshaw presented handwritten notations indicating that he had helped do a cutdown on Kennedy's left leg. In his book, he claims to have worked on Kennedy's right leg.

Crenshaw complains that *JAMA* failed to report eight references to him by five members of the Parkland medical team in Volume 6 of the 26 volumes of Warren Commission supplementary exhibits and testimony. *JAMA* did publish a letter (October 7, 1992) to this effect. However, these few references to Crenshaw weaken his claims.

Crenshaw is not mentioned in the final Warren Commission report. Crenshaw was never interviewed by the Warren Commission investigators. Crenshaw never submitted a medical statement to the Warren Commission and/or staff notes to Parkland Hospital.

There are 19 physicians cited in Volume 6; 15 do not mention Crenshaw. One who does, Dr Baxter, later testified: ". . . their names I'm not sure of. The reason I'm not sure is that we had some of the same crew and a different crew on the governor [Connally] and on Oswald, and I'm afraid that I've gotten them mixed up" (Volume 6, page 41).

Kenneth Salyer, MD, describes Crenshaw's role this way: "Dr Crenshaw participated about the extent I did. We were occupied in making sure an IV was going and hanging up a bottle of blood." He adds, "There were a lot of doctors standing around and I didn't really get to observe the nature of the wound in the throat" (Volume 6, page 81). This contradicts Crenshaw's claim of prominence and his certainty that the throat wound was a "wound of entry."

Perhaps the most damaging testimony from Volume 6 is the statement from Dr Robert McClelland, who testified that he and Crenshaw entered the emergency room together en route to Trauma Room 1. McClelland testified that by the time he arrived the bullet wound in Kennedy's neck had been obliterated by the tracheostomy (page 32). Crenshaw, when confronted upon deposition with this damaging evidence, replied that he and McClelland arrived together and that McClelland did not see the bullet hole because he "had looked away," but that, nevertheless, he (Crenshaw) observed the bullet hole for a "fraction of a second" (Crenshaw deposition, September 12-13, 1994, pages 97-99, 237-239).

Thus, the reader may choose whether to believe an alleged "observation"—a split second in duration—of a man not trained in pathology or the findings of a four-hour autopsy performed by three pathologists, supported by still-available x-rays and photographs, and confirmed over the years by three additional expert panels composed of 17 physicians. We believe in the evidence.